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FEC FORM 1

STATEMENT OF ORGANIZATION

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NAME OF COMMITTEE (in full)		(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
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ADDRESS (number and street)	PO	1B101× 1616	9		
(Check if address is changed)					
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		1	CITY	STATE ZIP CODE	
COMMITTEE'S E-MAIL ADDRES	SS (Plea	se provide only one e	-mail address)		
(Check if address is changed)	ALEXICALIEX MOIOINIEVI (OM				
	L	<u> </u>			
COMMITTEE'S WEB PAGE ADDRESS (URL)					
COMMITTEE'S WEB PAGE AD		· _ ·	24	1	
(Check if address is changed)	ALEXIMO ONEY COM				
2. DATE 1 1 3	å ′	20.1.			
3. FEC IDENTIFICATION N	UMBER	C			
4. IS THIS STATEMENT	NE	W (N) OR	AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasure	r	Domini	c Michae	1 Giampietro	
Signature of Treasurer Pate 41 30 2011					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		